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ANNUAL MEETING OF THE GRADUATE NURSES' ASSOCIATION OF BRITISH COLUMBIA

The first annual meeting of the Graduate Nurses' Association of British Columbia was held in the Board of Trade Rooms, Molsons Bank Building, Vancouver, on June 13th and 14th. Miss Wright, the President, occupied the chair. A large number of members and delegates were present. After the invocation, Miss Wright welcomed the delegates, and, in her address, explained the Registration Bill now under discussion.

"The Daily Province" says:

The Bill provides for the establishment of the Graduate Nurses' Association, a corporate body, with officers and an executive council of twelve members, whose powers are laid down in the bill, to examine and appoint nurses as registered nurses, and provides penalties against fraud and misrepresentation in using the title of registertd nurse. A register will be kept by the association, and only those nurses whose names are therein will be allowed to describe themselves as registered nurses in British Columbia.

The qualifications for registered nurses are defined by the bill as follows: They must be graduates of training schools approved by the council of the association in the province, or who are registered as trained nurses in any other province which has substantially similar requirements. They must be of good moral character, and at least twenty-one years of age, and must pass the examination decreed by the board of examiners of the council.

The examination will include elementary bacteriology, materia medica, anatomy and physiology, dietetics, medical nursing (including contagious diseases), surgical nursing (including gynaecology), obstetric nursing and children's diseases. The examining board will consist of four members of the council, who are graduates of recognized training schools of not less than 100 beds, with a general training of three years, and who have had at least two years' additional experience as nurses.

Certificates may be revoked for inefficiency, and offences against laws or morals, and penalties are provided for the punishment of fraud

or misrepresentation, in attempting to obtain certificates of registration, and for the use of the letters R.N. by unauthorized persons.

Clause 47, the last clause of the bill, is one on which the members of the association lay great stress, because it definitely answers the objection raised in some quarters that the bill is aimed against the nursing of friends, and seeks to make a monopoly of professional nursing. The clause reads that the act shall not be construed to affect or apply to the gratuitous nursing of friends, or members of the family, nor to any person nursing the sick for hire, who does not assume or pretend to be a registered nurse.

After a discussion of various points of the Nurses' Registration Bill, it was resolved that the fee for registration, which was named as $25 in the bill, should be reduced to $10.00,"

Miss Breeze, Secretary-treasurer, gave her report, after which Miss Judge, Secretary of the Constitution Committee, read over the Constitution and By-laws. Miss Randall moved in amendment that the Association should meet three times a year instead of once, and this motion was carried unanimously.

Miss Morrison, on behalf of the Victoria Club, extended an invitation to the Association to hold the next meeting in Victoria. The invitation was accepted. It was unanimously decided that the P. C. Association should invite the Nurses of the Canadian National Association to hold their annual meeting in Vancouver on their way to the International Congress, which meets in San Francisco in 1915.

The former officers of the Association were re-elected by acclamation, with the exception of Miss McDonald, of Victoria, who resigned the position of first vice-president. Miss Clark, of Victoria, was elected to the post of third vice-president by acclamation, Miss Randall, of Vancouver, becoming first vice-president, and Miss Patten, of Kamloops, taking the position of second vice-president. Miss Wright, of New Westminster, remains President, and Miss E. Breeze, of 1032 Barclay Street, Vancouver, continues as Secretary.

The afternoon session was opened with an address of welcome by Dr. Proctor, who assured the members of the sympathy and co-operation of the medical profession in their efforts to secure the passage of the Registration Bill. Miss Trew, President of the Vancouver Graduate Nurses' Association, gave a short address of welcome on behalf of the nurses.

Miss Scott read a paper on "The Educational Requirements for Admission to Registration." Miss Randall, Superintendent of the Vancouver General Hospital, led the discussion. She thought that an Inspector of Training Schools would be of inestimable value to the small hospitals. The need for registration is great and simply because

other provinces had not done it was no reason why British Columbia should not pioneer the movement.

Miss Gillis read a paper on "The Tubercular Situation in Vancouver."

"Miss Gillis stated that there were hundreds of advanced cases of tuberculosis in Vancouver alone, half of which were not reported, in spite of the fact that those who knew of it, and were responsible for not reporting, knew the importance of obeying the law. This pointed to the necessity of more serious, systematic and concentrated efforts being made by all who have the welfare of their fellow-citizens at heart.

" 'It can be figured,' said Miss Gillis, 'that every death from tuberlosis increases the morbidity rate by five, and it would therefore appear as if the proper observance of the law by segregating of cases occurring in lodging houses, dormitory missions, tenements, and construction camps would be a tremendous step towards the prevention of tuberculosis. A good deal of help in this way could be furnished by training workers in insanitary surroundings in the precautions to be taken to prevent the disease from attacking them.'

"Miss Gillis instanced the case of three workers, A, B and C, who were fellow-workers in a wholesale house in the city. A contracted tuberculosis and was admitted to the sanitarium as an advanced case; eight months after B was admitted, and four months later C also became an in patient, being entered as a light case. After his admittance, C discovered that he had occupied the same room as B had done.

"Miss Gillis pleaded for the greatest rigidity in the administration of the immigration laws, as this was a fruitful source of infection, and stated that the housing problem was an overwhelming one in Vancouver. 'Within the last three months, within the limits of the city there have been 59 new cases, of which 42 were advanced cases, and of this number 45 were rooming house cases. This represented an increase of 100 per cent. over the same period of 1912, and there is every reason to believe that unless more stringent measures are taken immediately there will be a largely increased percentage in the near future."

"While the Vancouver General Hospital accommodated 18 and the Sanatorium 42 patients, they were always filled, and what could be done with advanced cases, asked Miss Gillis. The only preventive work at present being carried out in the city was by the anti-Tuberculosis Society Auxiliary.

" 'If we know that 300 houses in the city are unfit for human habitation, and as many more are overerowded, why should they not be razed, and the infected soil turned up to the fresh air and sunshine? If three persons die every week in Vancouver of tuberculosis, is it not

up to the citizens to put their shoulder to the wheel, and to make every effort to stop the spread of this disease?' "

A resolution was adopted to the effect that the Graduate Nurses' Association of British Columbia would be glad to help the anti-Tuberculosis Auxiliary by every means in their power in the fight against the disease.

The morning session, June 14th, opened with a paper by Miss Norcross on "The Nurse's Mission in the World."

Miss Norcross dwelt on the increased sphere of woman's activities during the last ten years. The nurse's vocation has also widened and she is now employed in preventive work as school nurse, anti-tuberculosis nurse, social service nurse, and other fields undreamed of formerly. New York was the first city to appoint school nurses, in 1902, and Montreal was the first Canadian city to do so, some five years later, being followed by Hamilton in 1908, Winnipeg in 1909, Vancouver and Toronto in 1910, Stratford, London (Ont.), Brantford and New Westminster in 1911, Brandon, Saskatoon, Edmonton, South Vancouver and Victoria in 1912.

Miss McLeod, in her paper on "Social Service Work," stated that Vancouver took up this branch of work in March, 1912, and in the fourteen months since its institution 520 patients had been helped in various ways. Miss McLeod emphasized the need which existed for some link between the hospital and the outside world, and stated that a great deal of money had been wasted in the past for the lack of the social service work.

Since the opening of the King's Daughters Convalescent Home, good work had been done in providing comfortable homes for convalescent patients, supplying them with nourishing food, and in following up patients to their homes and attending them through the final stages of their sickness. A great work had also been done by tending those families which were left at home while the mother was in the hospital, and in many ways the social service nurse had abundantly proved her worth.

Miss Macnaughton, President of the Women's Local Council, stated they were in full sympathy with the nurses in their work and the school trustees were more than satisfied with the work of the school nurses.

The Alumnae Association of Vancouver General Hospital entertained the members and delegates at an informal dance at Lester Hall on Friday evening. At the close of the session on Saturday morning the Vancouver Graduate Nurses' Association entertained at luncheon at Glencoe Lodge. After luncheon Miss Randall, Superintendent of Vancouver General Hospital, entertained at tea at the Nurses' Home. The tea was largely attended and proved very enjoyable to the visit-

ing nurses and their friends. Early in the afternoon Miss Trew, on behalf of the nurses, presented a beautiful bouquet of carnations to Miss Wright, President of the Provincial Association.

Thus closed the first annual convention which, in the opinion of all, was a decided success.

Among the out-of-town nurses who visited Vancouver to attend the annual meeting of the Graduate Nurses' Association of British Columbia, were the following: Miss Morrison, Miss Norcross, Miss Hurst, Miss Williams, from Victoria; Miss Wright, Miss Scott, Miss Gray, Mrs. Dorgan, Miss Cassidy, Miss Slater, Miss Potter, Mrs. Major, from New Westminster; Miss Thornber and Miss Clarke, Kelowna; Miss Robertson, Nanaimo; Miss McIntosh, Wellington; Miss McLeish and Miss McLeay, North Vancouver.

A FOUR MONTHS' COURSE IN PUBLIC HEALTH NURSING, GIVEN BY THE INSTRUCTIVE DISTRICT NURSING ASSOCIATION OF BOSTON.

Having had the opportunity to study this institution by taking the four months' course in Public Health Nursing, I would like to share my knowledge of the course with my Canadian sister Nurses, and I hope the following brief summary of the work will be helpful to them.

The Instructive District Nursing Association of Boston is an institution having for its aim the relief of the sick poor in their homes, and instruction in home nursing.

The program of the four months' course consists of a theoretical part, including a series of classes, lectures, conferences and discussions. The class work deals with the following subjects:

A.—1. An Introduction to the Social Field with special reference to the life of the industrial city family—who they are, how they live, their health, education, recreation, labor, politics, religion, ethics and ideals—to get a sympathetic understanding of their lives.

2. Social progress as to health, education, recreation, etc., considering what other agencies are doing and how best Nurses can co-operate with them. Changes in economic development causing growth of cities. Life of the industrial family in the city.

Who they are—Nationalities. Immigration.

Where they live—Housing. Sanitary problems.

How they live. Vitality and health of the family.

1. Growth of health powers.
2. Board of Health, city and state.
   (a) Water supply.
   (b) Milk supply.
   (c) Food supply.

Education—Schools. Settlements.

Recreation—need of

(a) Parks, gymnasiums, swimming pools, etc.
(b) Public schools as social centres.
(c) Clubs at settlements.
(d) Moving pictures, dance halls, theatres, etc.

Religion, ethical and political life—

(a) Local powers in the community.

Social life of the community from the point of view of man, woman and child.

History of poor relief—

1. Best measures to follow in helping needy.
2. Co-operation with other agencies.

Standards of living—

1. What tends to lower and the causes of poverty.
2. How to raise (a) Industrial training.
(b) Workmen's compensation.
(c) Social insurance.
(d) Organization of labor.
(e) Labor legislation.
(f) A living wage.

Conservation, efficiency and scientific management.

Development of public opinion.

B.—The History, Principles and Administration of Public Health Nursing, including the origin of district nursing, its purposes, principles and methods, records and record keeping, organization, administration and reports; and the development of school nursing, preventive work for babies, tuberculosis, nursing, welfare work in shops and factories, hospital social service and rural nursing.

C.—Medical-social Relation of Disease.

What can be done toward prevention as well as treatment in Infant Mortality, Tuberculosis, Alcoholism, Venereal disease, Neurasthenia and Occupational diseases.

Through a close relationship with the Boston School for Social workers it has been possible for the students to attend a course of lectures in medical-social work. These lectures have been delivered by leading medical and social experts.

The students attend the weekly meetings of the Instructive District Nursing Association, where interesting problems and social questions are discussed.

The practical work consists, first, in nursing the patients under the care of the Instructive District Nursing Association for two

months. By giving the nursing care thoroughly and kindly, the confidence and affection of the family are gained, and the nurse's advice not only as to the physical conditions, but as to general standards of living, is more likely to be followed. Student nurses are given great latitude in the care of their patients and work under the supervision of experienced, expert workers. The last week or ten days of the first two months is spent doing prenatal nursing, which includes visiting the prospective mothers in their homes, and helping to teach them the hygiene of pregnancy and the preparation for and care of the newborn baby. There are many Italians, Russians, Syrians and Greeks in Boston and many of these foreign mothers know very little about baby welfare. It is pleasing to go among them and they are willing and eager to adopt modern customs.

One month is spent with the Milk and Baby Hygiene Association, where the student works under the supervision of one of the experienced Baby Welfare Nurses of that Association. The work at the milk station consists in giving out pure milk, previously modified to suit the need of the individual baby; instruction, principally by demonstration, in the homes of these babies. The nurse teaches the mother how to bathe and dress the baby, how to feed it, and the proper care of milk, bottles and nipples. The greatest importance is attached to the value of breast feeding. Once each week there is a conference of doctor, nurses and mothers with their babies. The babies are weighed, the doctor examines each one, and those who are not doing well are kept under close observation until there is improvement in their condition.

There is also a little mothers' club, where Italian girls, of from eight to fourteen years, are taught the care of babies. In a very short time they are able to do many things for the baby at home, and when they in turn become mothers they will be able to care for their own babies in an intelligent manner.

Opportunity is afforded for school nursing in connection with the Boston School Nurses. The nurse visits the schools, observes in the homes of the school children, and goes to the various clinics with the children requiring treatment.

A portion of the four months is spent in the observation of welfare work in shops and factories, tuberculosis nursing, almshouse nursing, and nursing in institutions caring for the feeble-minded and insane.

As a part of the studies, visits are made to various agencies to observe their work, thereby making the class discussion both clear and practical.

The last month is spent with the Boston Associated Charities, an Association for the purpose of raising the needy above the need of relief, preventing begging and imposition, diminishing pauperism,

encouraging thrift, self-dependence and industry through friendly intercourse, advice and sympathy.

The Instructive District Nursing Association is a corporate member of the National Public Health Organization and shares the privileges and advantages of this great Association. Miss Mary Beard, the Director of the Instructive District Nursing Association, is one of the Directors of the National Organization.

One word about the life at 561 Massachusetts Ave., the Central House of the Association: It is delightful. I sincerely hope Nurses who are considering the advisability of taking this course may enjoy the four months as thoroughly as I have enjoyed them. I think I am expressing the opinion of a large number of public health Nurses when I say the Nurse just out of the training school, where she has acquired a knowledge, in theory and practise, of the difficult art of nursing, is yet unfitted for public health work until she has had experience and teaching in the various branches of this work.

Mary Isabel Magee.

THE STORY OF THE TORONTO GRADUATE NURSES' CLUB

When Darwin first proposed his theory of evolution all the orthodox were highly shocked at the idea and decided that it was contrary to the story of the Creation as told in Genesis. Now, whether or not we believe in Darwin's theory, we all believe in evolution. We find it wherever we look and especially so in that great subject of the high cost of living. We find it, too, in regard to women's occupations.

When one of our contemporaries was a babe, her mother, looking at her child and building castles for her, thought of but two occupations—school teaching and music teaching. When the baby became a child and saw a girl in the kitchen getting paid for services, she, having learned something of the power of money, determined when she grew up to become a "hired girl." When the child was grown to young womanhood she became a graduate nurse. Later her ideas changed once more and she became a wife and mother, and there ambition left her to build her castles in the air like the other mother, but with a broader outlook and greater range, the result of evolution.

In regard to nursing itself, Miss Nutting's "History of Nursing" is but one long interesting story of evolution. Coming nearer home and within the knowledge of most of us we see the same thing. In the evolution of nursing in Toronto the different stages have been most marked, especially to the nurses who have lived in Toronto for the past fifteen years. At first there was the rivalry and the "I-am-better-than-thee" spirit to be found between graduates of the different schools. Thanks to the good offices of the broader-minded among the

nurses, this began to wear away and the Graduate Nurses' Association of Ontario and the Central Registry were formed and "The Canadian Nurse" started on its career. In the fall of 1905 the Alumnae Associations of Toronto combined to meet the expenses of a course of lectures given by Miss Damer, Madame Von Wagner, Dr. Clarke and others. The resident graduates of schools outside of Toronto having no organization of their own and yet wishing to have some fellowship with the others, the next year helped to form the "Toronto Graduate Nurses' Social Club." But during this time the need of a meeting place was forcing itself more and more upon all, and Mrs. Broughall, in her address at the Central Registry Birthday Party, in June, 1906, put most clearly the need of a nurses' clubhouse. In March, 1907, some of the nurses interested met with Mr. Grier, a lawyer, and Mr. Paffard, a business man, to formulate a plan, and soon the "Toronto Graduate Nurses' Club" was incorporated, under the Benevolent Societies' Act, just three days before the Act went out of force. Twelve nurses signed the petition for incorporation and thus became the Incorporators. The object of the club was to obtain a clubhouse for nurses which should become the headquarters for nurses in Toronto and Ontario. It was felt that the different nursing organizations required a meeting place, the nurses themselves needed a place where they could meet one another and where those nurses visiting in Toronto might find a headquarters.

The shares of the Club were put at the small price of five dollars, in order to make it possible for all to join, those eligible being all who are eligible for membership in the Graduate Nurses' Association of Ontario. In order to raise funds for the cause an exhibition of trained horses and ponies was held at the Grand Opera House for a week in June, 1907, which netted $600. In November, 1908, a "Fair of All Nations" was held in Massey Hall, which was a success in every way, producing $3,000. In November, 1910, an "Extravaganza" was given in Massey Hall, which was a financial failure, and the nurses became discouraged in regard to entertainments until, in the fall of 1912, they held a Bazaar on a much smaller scale, which was such a success financially and in bringing the nurses together socially that it is to become an annual event.

Many different plans were suggested as to the form the Clubhouse should take, and at different times advertisements were inserted in the daily papers asking for suitable houses. In January, 1909, a house on Isabella Street was bought for $7,000.00. It was immediately rented for three months and when the tenancy expired the Club, not feeling it was a propitious time to open it, the house was sold, netting a profit on the transaction of $600.00.

Prior to this time and until July, 1911, when a room was rented

in the Canadian Foresters' Building, at 22 College Street, nearly all the meetings of the Club and its Executive were held through the generosity of Mr. Robertson and Miss Brent at the Residence of the Hospital for Sick Children. In November, 1911, Mr. John Ross Robertson, the kind friend of nurses and little children, made a most generous offer to the Club of a house on Sherbourne Street, he to provide the house and the Club to supply the furnishings and meet the expenses of operating. The offer was gladly accepted.

But Mr. Robertson's generous spirit was not content, and he must needs furnish the Clubhouse too. Mr. and Mrs. Robertson spared neither time, thought, nor money, and the result is a Clubhouse so comfortable, so artistic and restful that the Toronto nurses are the envy of all who visit it.

On May 6th, 1912, the Clubhouse was opened and formally presented to the nurses by Mr. Robertson and accepted on behalf of the members by Mrs. Paffard, the President.

Mr. Robertson, in his address, said in part:

"May I be permitted to say that, after providing for the comfort of those nurses in our own fold by the erection of a residence in connection with the Hospital for Sick Children, I felt that something ought to be done to promote the comfort and happiness of the nursing profession at large?

Men, as you know, have almost all the comforts of a home in their luxurious clubs, where they have pleasant resting-places in which to enjoy themselves and discuss the topics of the day, during the spare business hours.

And so the thought occurred to me, many years ago, that there was no good reason why the women of the nursing profession should not have their clubhouse just like the men, but I had so much other work on hand that I laid the idea on the shelf to be taken up later.

Some years ago the graduate nurses of Toronto made a start in the same direction. They wanted a clubhouse, issued a prospectus, and obtained an act of incorporation and accumulated some funds.

But the financial problem was a difficult one to solve, and, seeing that the goal of their ambition was not likely to be reached for many years, I felt that the best thing I could do was to provide a building, with equipment complete, which would serve as a centre for a meeting-place for all the associations identified with the science of nursing in Toronto.

You believe, and I believe, that this city requires such headquarters as are here provided.

You are now supplied with a clubhouse, furnished throughout, and handed over to you for a two-year test of your experiment.

If a long-felt want is here, the clubhouse to meet that long-felt want is also here.

The future of the experiment is in your hands, and I trust that the nurses of Toronto recognize the responsibilities which accompany the gift, for the future of the clubhouse depends on the support the nurses of Toronto give it.

I have tried to do my part, and am ready at all times to further the success of this venture, in which we have all combined to establish a centre of association for all the nurses of Toronto.

Remember, this clubhouse is not for the use of any clique or class, but for every woman who has devoted her life to your noble profession and has qualified to follow that profession.

The future of this experiment lies with you—to make or to mar—and I now declare this clubhouse open, in the hope that the success and usefulness of our experiment may exceed our fondest anticipations."

Mr. Robertson has not confined his gifts to the house proper, but has added a player-piano, pictures and numerous other articles.

Miss Annie I. Robinson was the first Superintendent, but in September she was compelled to leave, much to the disappointment of the members, owing to illness at home. Miss McKenzie was chosen as her successor, proving herself since that time one having her heart in her work.

The Clubhouse has more than fulfilled expectations. At one time there were, possibly, dreams of a noble building accommodating all the Women's Societies of Toronto, but, as is often the case, the reality is more satisfying than the dream. Nurses from many countries have been its guests and have gone home to tell how well they liked the Toronto Nurses' Clubhouse. The Central Registry now makes its home there and doctors and nurses feel freer to visit it than when it was in a private house. The Social Service Workers and the School Nurses' Asociation have their meeting-place at the "Club." Nurses' Societies have business and social meetings there. Nurses have lunch and afternoon tea, and feel that at last they have a place of their own. The membership has increased very materially, but all the graduates in Toronto are wanted. There are many members who are non-resident in Toronto and these feel that they have a home in the city to which they can go. May the Toronto Graduate Nurses' Club long flourish and prove a boon to all Nurses whether resident in Toronto or not.

Lucy B. Pellatt.

AN EXCURSION

Mrs. Crawford Hamilton

The old legend "See Rome and die" never appealed to me, because I never wanted to see Rome, but I always wanted to see Mount Robson, and now that I have actually seen the highest mountain in the Rockies, I feel I can die content. Through the courtesy of the C.P.R. and the G.T.P. railways the Canadian Women's Press Club held its triennial meetings in Edmonton, the second week in June, and after several strenuous days of business meetings and various entertainments, the whole party of one hundred and eight boarded the special train of Pullmans that the G.T.P. had ordered to take them to Tete Jaune Cache, on a trip to the end of steel. What a lot of assorting and good-natured bantering there was when it was found that a good many would have to "double up" and sleep two in a berth. Naturally, the pairing off went by size, and weight, and happy were those who could choose a "Bunkie" to suit their requirements. Finally, all was arranged satisfactorily, and meanwhile the train had slowly pulled out of Edmonton and now all was quiet and the weary ones already asleep. Next morning we found that we were well into the mountains, and by breakfast time we were entering the famous Jasper Park. Here the scenery is very similar to that of the National Park at Banff, although in the opinion of those who had seen both, the mountains at Jasper Park did not seem as high nor as close as those at Banff. The old "Jasper House" post of the H.B.C. is three miles away up the valley from the present station called after it. About eleven o'clock we stopped at Robson Siding and all got off to view the scenery. Evidently the old mountain was expecting the ladies, for when we first saw him he had a cap of fleecy-white cloud pulled well down on his brow, but just as soon as everyone had got onto the ground and every camera fiend ready for a snap, then he became at once a "Knight of Old" and doffed his cap that the ladies might view him in all his majesty of snows and height. It seemed to inspire each one with the spirit of vast silences and there were no exclamations of delight until all were ready to turn back to the train, and even then there seemed to be no language rightly fitted to express the grandeur of that "Cloud-lifting." Now our way wound along the high cliffs on the bank of the Fraser, gradually descending until we reached Tete Jaune, about 2 p.m., where we made a lengthy stop in order to see the sights. It is almost entirely a city of tents with a few roughly constructed houses, but has a population of nearly a thousand men with a few women. As the Fraser was so high it had flooded all the flats around the "City of Tents," and we could not go all over the place, one of the places flooded being the small Hospital which is in charge of two Sisters of Mercy and the Company's Doctor.

At present, as there were no patients, there was no trouble about it. Many of the Press Women from Eastern Canada had never seen a "City of nearly all Men" before, and it was quite a novelty. They all turned out for our benefit and did the honors of the place. We went down to the river to see some of the scows start on their way to Fort George, and I know there was many a silent prayer offered for the safety of those men on the scows. The Fraser here is a treacherously smiling, oily-looking stream, and the moment a scow was let loose it seemed to go with the speed of an express train, so that momentarily we expected to see it disappear under the water, as it looked as though the river was flowing so fast behind it that in a few minutes it must flow over the slower-going object.

Next we went to where they were building the scows, and found that they are not built to last more than the one trip, as nothing can navigate up the Fraser, so that those scows fortunate enough to reach Fort George are never used again, but are broken up for the lumber which they contain.

A rather funny incident occurred when we were watching an old Scotchman who was calking a scow. One of the younger Presswomen from the East said: "I have never seen so many men together before, and I suppose you have never seen so many women as are here to-day, at one time." "No," said the Scot, "but I have been married." "Oh," said the lady, "and is your wife here." "Indeed, no," said the Scot, "she is dead this fifteen year." Then he added quickly as an after thought, "But, Miss, I am open for an engagement, and the Magistrate lives up the hill." I offered to stand as witness to the bargain, but the Eastern lady was not to be won in such a truly Western fashion, so one romance was nipped in the bud. We sadly said good-bye, but some of the men said, "No, only Au Revoir, as we will certainly come east to spend the winter and see if we cannot persuade some of you unmarried ladies to come back and ply both pen and pans in this new country."

Our trip back to Edmonton gave us views to impress on our minds the most noted points of interest, and so ended a very pleasant and profitable excursion. On our return to Calgary the C.P.R. provided a "Special," and took us to Banff, where we were the guests of the Company at their fine Hotel. Very large additions have been made to it during the past winter, and the new dining room was opened with a grand ball, in honor of the visiting guests. Needless to say that everyone donned their very best gowns and did honor to the occasion by enjoying themselves immensely. The next day some of the party went to the Coast, but the majority turned eastwards and separated at Calgary, with feelings of regret that a very enjoyable holiday had come to an end. There was one thing that will always live in the memory of

the club, and that was the text of our retiring President's address: "That there is neither East nor West, but that it is all one Dominion, therefore our ideas should combine both East and West and so make a glorious whole." It was a fine, broad motto, and it is to be hoped that all the members of the club will act upon it, both in writing and in daily life.

MRS. MILL PELLATT
(Miss Lucy Bowerman, Class 1895, Toronto General Hospital.)

THE NEW TORONTO GENERAL HOSPITAL

The doors of this large, stately institution yielded as Sir. John M. Gibson turned the golden key on June 19th, at 3.15 p.m. A very large gathering of interested citizens witnessed the opening, and gave close attention to the addresses that followed.

Mr. J. W. Flavelle, Chairman of the Hospital Board, occupied the chair, and with him on the platform were His Honor Sir John Gibson, Lieut.-Governor of Ontario; Sir James Whitney, Premier of Ontario, Rev. Murdoch Mackenzie, Bishop Reeve, Rev. Father Kidd, Rev. Chancellor Burwash, Mayor Hocken, the Board of Trustees, and others.

Rev. Murdoch Mackenzie read the opening psalm, and Bishop Reeve offered the invocation.

Sir John Gibson, in his address, regretted the absence of His Royal Highness the Duke of Connaught, whose interest in institutions dedicated to the needs of suffering humanity is well known.

Sir James Whitney astonished and gratified his audience by announcing that the Government "had decided to appoint a commission to deal with the whole subject of medical education and the practice of medicine. The object of this will be to secure information on which to base legislation under which every imaginable application such as I have described can be regulated and controlled and governed in the interests of the people."

The commission will have power to investigate and deal with all societies and practitioners whose object is preventing, healing or curing human disorders. It will be the object of the commission to investigate and report upon all matters relating to the education or practice of medicine; the constitution, powers and by-laws of the College of Physicians and Surgeons of Ontario and the Ontario Medical Council; the medical faculties of all universities; osteopathy, and the desirability of the creation of a College of Osteopathy in the province; dentistry; optometry; nursing; Christian Science and any other science in the way of healing practised by any other sect.

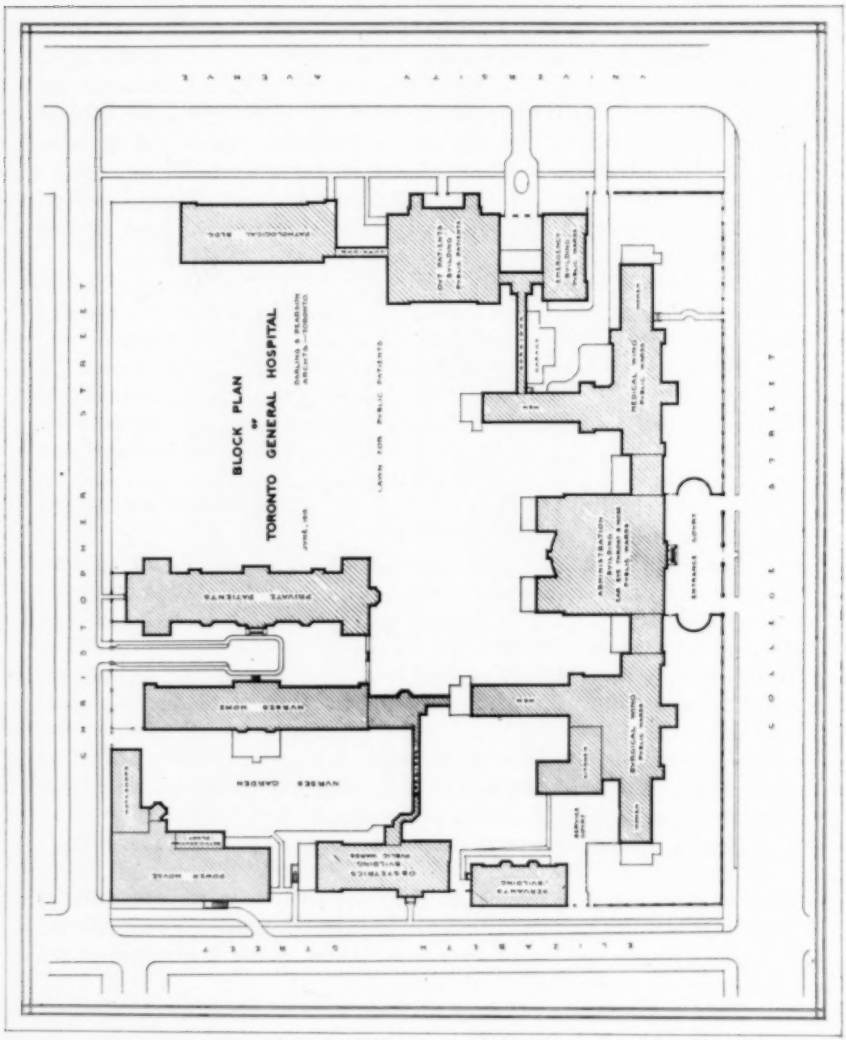
Mayor Hocken congratulated Sir James on his announcement.

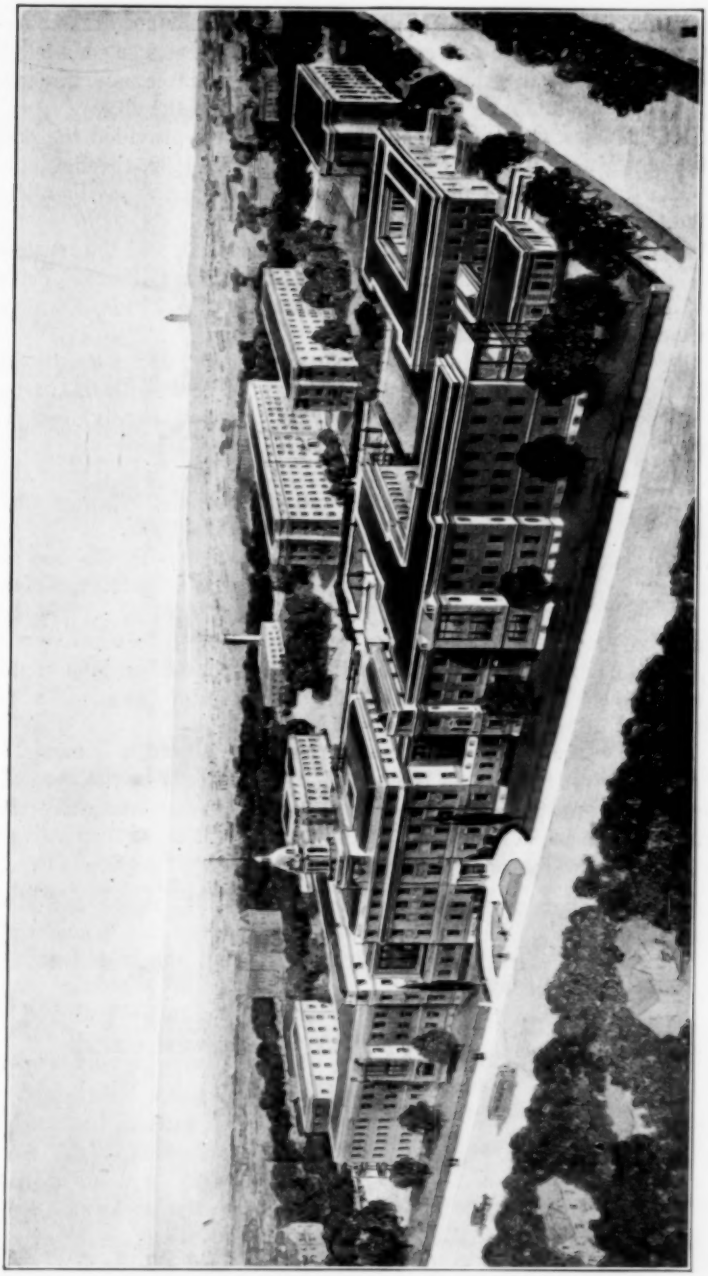
To his Honor Sir John Gibson, Sir James Whitney and Mayor Hocken souvenir keys of gold in the Yale pattern were presented, as well as de luxe copies of a history of the hospital, written by Dr. Clarke.

Mr. Flavelle, in his address, went back to the beginning of the history of the Toronto General Hospital.

In 1818, lands in the County of York were set apart by the Government as a hospital reservation. From this ancient beginning the present magnificent general hospital received its start. Following are some excerpts from Mr. Flavelle's address:

In 1820 the building of the first general hospital in Toronto—on King and John Streets—was commenced, the sinews of war being


BLOCK PLAN
OF
TORONTO GENERAL HOSPITAL
DARLING & PEARSON
ARCHTS.—TORONTO
JUNE, 1913
LAWN FOR PUBLIC PATIENTS
CHRISTOPHER STREET
COLLEGE STREET
ELIZABETH STREET
YONGE STREET
OUT PATIENTS BUILDING PUBLIC WARDS
EMERGENCY PUBLIC WARDS
MEDICAL WING PUBLIC WARDS
ADMINISTRATION AND SEMI PRIVATE & NURSE PUBLIC WARDS
ENTRANCE LOBBY
SURGICAL WING PUBLIC WARDS
PRIVATE PATIENTS
NURSES HOME
NURSES GARDEN
POWER HOUSE
OBSTETRIC BUILDING PUBLIC WARDS
MORGUE
ISOLATION BUILDING



BIRD'S-EYE VIEW OF TORONTO GENERAL HOSPITAL.

provided by £4,000 sent from England. In 1854 a new hospital, covering some seven acres of land east of Parliament Street was completed. In 1868 it was closed through lack of funds for maintenance, but was re-opened in 1869 upon receiving a small grant from the city.

In 1877 Messrs. Cawthra, Gooderham and Worts provided the cost for the western division of the main building. In 1882, through subscriptions received from private citizens, the woman's pavilion was erected.

In 1904 it was decided to build a larger hospital, and the trustees decided to change the location, the site on College Street being selected. The hospital just opened has a capacity of 670 beds, 300 more than the old one, and cost $3,450,000.

Donors to the Toronto General Hospital—past and present—include these names and amounts: Mr. Cawthra Mulock, $100,000; trustees of Massey Estate, $100,000; Senator Cox and family, cost of Nurses' home; Mr. J. C. Eaton, $350,000; an anonymous giver, $300,000; Misses Agnes and Jane Shields, $140,000; the trustees have also received several donations of $25,000 and $50,000; the Whitney Government gave the hospital $300,000 and the city $200,000.

Three weeks ago the trustees applied themselves to the task of securing $800,000—the balance owing uncovered by subscriptions—and have so far secured $300,000 from private citizens; the City Council has recommended that a further grant of $210,000 be made by the city, and the citizens generally are asked to co-operate and help secure the remaining $300,000 of indebtedness. Subscriptions of $50,000 had been received during the morning.

A deep sense of appreciation was expressed for the services of the men and women who, in the past, have ministered to the needs of the sick in the wards of the Toronto General Hospital, and there was warm applause when the names of Dr. Charles O'Reilly, Miss Snively and Mr. A. F. Miller were mentioned.—*The Evening Telegram.*

Other speakers were: Mayor Hocken, Mr. J. C. Eaton and Rev. Father Kidd. Rev. Chancellor Burwash pronounced the Benediction.

Sir John Gibson and Mr. Flavelle then led the way into the building, where all viewed with keen interest the provision made for the care of Toronto's sick. The visitors eventually gathered at the out-patient department, where refreshments were served.

THE SCHOOL NURSE

The regular monthly meeting of the Canadian Public School Nurses' Association was held Monday, June 2nd, at 3.30 p.m., and being the last meeting for the year a picnic was held at Centre Island Park.

One of the points in the business was that the out-of-town members be asked to send some news or messages for each meeting. In September we hope to have such a letter from all co-workers who read this page.

At the recent Congress of the Ontario Dental Association in Toronto, Dr. D. King Smith, specialist in skin diseases, gave a paper on "The Mouth Aspects of Syphilis," some of the points of which will be of great assistance to the school nurse in her review of the hundreds of mouths she daily sees.

Dr. Smith called attention to the fact that syphilis is a constitutional disease, the medium of distribution being the blood and lymph, and having marked manifestations in the mouth and throat.

These may consist of nothing more than a chancre on the lip, looking sore, but in reality painless and having a welt-like feeling to the touch—or there may be a coldsore which refuses to heal, accompanied by slight fissures around the nose. In the mouth the lesions are most frequently on the sides of the tongue where it is roughened by the teeth. Such a patch shows a sharp line of demarcation between the infected tissues and those surrounding. The sores in the throat may be very slight, or may extend to the destruction of uvula, tonsils, etc. In some cases hoarseness and a falling out of the hair will be the only indications of a superficial examination, but in such cases the microscopic test is made. The stigmata on the teeth ("Hutchison teeth") do not signify unless accompanied by other manifestations.

The Canadian Nurse-School page is greatly in need of news from the members of the profession practising elsewhere. If the news is gleaned entirely from Toronto it is apt to become too local—we need news from other districts. Will every reader consider this a personal obligation and write us as frequently as possible of new methods, new problems, etc., the sender may not consider her item interesting because she is familiar with it, but it may be an entirely new phase of a subject, or a new solution of a problem to someone else.

On May 6th, 1913, at Niagara Falls, Ont., the marriage was celebrated of Miss England to Mr. J. Morphy. After a short holiday Mrs. Morphy returned and resumed her position in charge of the school nursing in Niagara.

Nose-blowing drill is one of the new features of the nurse's work during the class room inspections. If teacher and nurse treat the

subject seriously, the children soon accept it as such, and come to realize that a handkerchief is one of the essentials of dress. After the drill is completed the whole class is made to breathe deeply, to demonstrate the comfort of clear breathing passages. This will have an inestimable value in the breathing and prevention of adenoids in the children.

A school nurse says: "In my opinion, the value of school nursing can scarcely be over-estimated. By its far-reaching and lasting influence for good on the physical and mental development of the child, its usefulness has been firmly established."

For the protection of immigrants against imposition and false representations, an Order-in-Council has been passed requiring all companies, firms or persons carrying on the business of an intelligence office, or employment or labor agency, to obtain a license from the Superintendent of Immigration, Ottawa.

CORRESPONDENCE

Helena, Montana, June 16th, 1913.

To the Editor of "The Canadian Nurse,"

Dear Editor,—

I am sending you a copy of our Bill on Registration of Nurses; with the rules governing the State Board, also those for the Registration of Training Schools.

The Board will hold its annual meeting in Butte, July 21st, giving examinations for any graduate not in the state at time of passage of Bill, also examinations for non-graduate nurses.

At that time all applications and credentials of graduate nurses eligible for registration without examination, will be passed on by the Board.

The Montana Bill stands for compulsory registration, and it is believed after July 21st, 1913, there will be few graduate nurses in good standing who are not also registered nurses.

Some of my friends in the nursing ranks in Ontario have, at times, asked me to send news items to our valuable "Canadian Nurse," that is why I am taking up your time telling you of our work here in the West.

Yours truly,
MARGARET HUGHES.

Honor does not wound the feelings of others. Ridicule does, and ridicule is a mild sort of persecution. It is not common courtesy to ridicule others, much less Christia ncharity.

Editorial

MUCH HAPPINESS TO OUR PRESIDENT!

The Canadian Nurse follows the President of "The Canadian Nurse Editorial Board" into her new home with the best of good wishes for future happiness. We are sure we voice the sentiments of every member of the Board in thus rejoicing in the happiness of our President. We have gained one more adviser, not lost our President.

REGISTRATION OF NURSES

The struggle on the part of the Nurses of the State of New York to make the Registration of Nurses mandatory unfortunately ended in failure. But evidence that this advance step is in the best interests of the profession is not wanting.

Some have realized that only by all properly qualified nurses being registered can we attain reasonably near to our ideals of efficiency and give to the public the power to discriminate and choose.

Two amendments to the Delaware Bill were obtained last session—one providing for compulsory registration. Montana stands for compulsory registration, as you will see by Miss Hughes' letter. Section 13 of the Montana Bill reads: "It shall be unlawful hereafter for any person to practise nursing as a trained, graduated, or registered nurse without a certificate as herein provided for."

Thus a sharp line of division between the trained and untrained will readily be discerned by the public, who will no longer be at a loss to know the quality of service to expect.

This high note of ensured efficiency was struck very emphatically at the convention in Atlantic City, when the great American Nurses' Association, comprised of over 20,000 nurses, put itself on record as unanimously endorsing compulsory registration of nurses.

These sections of the Montana Bill will be of interest—Sec. 9: "All applicants for registration under the provisions of this Act shall furnish satisfactory evidence that he, or she, is at least twenty-two years of age, of good moral character, and has been graduated from the training school of nurses connected with a general hospital approved by the Board, where a systematic course of at least two years' instruction is given, and all persons registered under the provisions of this Act shall pay to the Secretary of said Board a registration fee of ten dollars."

Sec. 6: "The President acting as Inspector of training schools shall inspect all training schools in the State of Montana, and shall

report to the Board and the Governor such training schools as shall provide courses of instruction in the subjects required by the Board. The Secretary shall enter in the registrator kept for this purpose the names of all nurses which are entitled to registration under the provisions of this Act. The schools so registered shall be required to pay to the Secretary of the Board a fee of twenty-five dollars upon registration."

THE NURSING EXHIBIT AT SAN FRANCISCO

Miss Dock, in outlining plans for this exhibit, seems to think that it must consist largely of American nursing. By this we presume Miss Dock means an exhibit furnished by the nurses of the United States, for she mentions specifically the national organizations, the Army and Navy and Rural Nursing, Social Service, etc., of that country.

We would respectfully draw attention to the fact that Canada is just across the line, and that The Canadian National Association of Trained Nurses stands ready to help make the Congress of 1915 the best yet.

THE DOMINION MEDICAL COUNCIL

The Confederation of the Medical Profession in Canada was marked by the opening of the Dominion Medical Register in July 1st—Confederation Day.

Now the graduate in medicine may take the examination set by the Dominion Medical Council, have his name entered in the Dominion Medical Register, and he has the privilege of practising in any Province in Canada upon registering with the Provincial Council. Examinations in each Province are no longer necessary.

The Dominion Medical Council held its first meeting in Ottawa in June, and made arrangements for the first Dominion Examinations, to take place in Montreal, on October 7, 1913.

This advance step, long advocated, has finally been accomplished. When will the nursing profession reach a similar plane?

THE CONVENTION AT ATLANTIC CITY

Webster says a convention is a body or assembly of persons met for some common purpose.

Viewing the great gathering at Atlantic City, one realized that the "common purpose" was a compelling force amongst the nurses, for every state in the Union was represented, not by one or two, but in

most cases by a number of devoted workers. There were also a number from Canada.

What was the "common purpose," the compelling force—the best amelioration of suffering, the prevention of disease, the best way to help people keep well and be good citizens—in fact to make the very best of life.

Will this "common purpose" be realized? Undoubtedly. Every session was crowded with eager listeners, and every speaker had a definite, helpful, inspiring message that bore the stamp of having been tested, that, in the days to come, will bear abundant fruit in every department of work—more united, enthusiastic effort; greater efficiency; deeper, truer consecration of the workers if that is possible, a great, wonderful, splendid convention, that was very much worth while!

Mrs. Mill Pellatt gives in this issue the story of the early days of the Toronto Graduate Nurses' Club, but she modestly omits the information that she mothered the cause. The idea was first conceived in her brain, the initial steps were promoted and made possible by her perseverance. It was entirely due to her unfailing enthusiasm and untiring energy and resource that the corporation really came into being and accomplished the things that it did before the days of the Club House.

The substantial fund collected by strenuous effort during the years of Mrs. Pellatt's presidency made it possible for the directors to undertake the operation of the beautiful Club House so generously donated by Mr. Robertson.

Mrs. Pellatt has, too, always taken a keen and active interest in The Graduate Nurses' Association of Ontario, in her own Alumnae and in The Canadian Nurse.

The profession owes much to this noble member whose interest never wanes.

Mrs. Hamilton's article will recall to many the early days of The Canadian Nurse, when she was a member of the Editorial Board, and a regular contributor. Her interest never wanes, and is a help and inspiration to those more closely connected with the work.

We much regret our inability to make good the promise to reproduce in this issue some of the papers given at the Convention at Berlin in May. For some unexplained reason they have failed to come to hand, and at the last minute we are obliged to change our plans.

The Guild of Saint Barnabas

As an old Guild member, I should like to say how glad I am that I had years ago the opportunity of joining the Guild. I wish more nurses might avail themselves of the privileges of membership in the Guild at St. Barnabas—especially more young nurses, during their training school days.

It is true and commonplace to say that a nurse's life is full of temptation, but that such is the fact we, who are nurses, surely know. In hispital there is the constant rush—the pressure of work—anxious work always, wearing alike one's mind and body, and not seldom making one's heart ache as well. So many things have to be crowded out and the things of the spirit are so likely to be among them. Surely one needs here all the help one can get, and the rule and aim of the Guild of St. Barnabas are a help. I know this by my own experience, and by that of other nurses. Among so much that is new and upsetting, the Guild rule and the Guild meetings help to keep one steady—help one, amidst new scenes, to walk in the old paths of faith and religious observance. Many a time in a nurse's life the Guild may be the influence which turns the scale on the side of the things which are "true and lovely and of good report."

And when one leaves the hospital and leads, it may be, the somewhat homeless and lonely life of a private nurse, the friendship of the Chaplain, of the Superior, and of the other Guild members, may mean so much. But the Guild can do something more than be a help to oneself—it can make one of greater use to others. Because as a Guild member, regarding nursing as indeed a vocation, one can truly help "to raise the tone of the profession," striving to make the Guild a real force for righteousness amidst much that is secular and commercial in the nursing world.

THE GRADUATE NURSES' ASSOCIATION OF ONTARIO

(Incorporated 1908)

President, Miss Bella Crosby, 41 Rose Ave., Toronto; First Vice-President, Mrs. W. S. Tilley, 56 George St., Brantford ; Second Vice-President, Miss G. A. Read, 156 John St., London; Recording Secretary, Miss Ina F. Pringle, 188 Avenue Road, Toronto; Corresponding Secretary, Miss Jessie Cooper, 30 Brunswick Ave., Toronto; Treasurer, Miss Julia F. Stewart, 12 Selby St., Toronto. Directors: Mrs. W. G. Struthers, 558 Bathurst St., Toronto; Mrs. A. H. Pafford, 194 Blythewood Road, North Toronto; Miss Mathieson, Riverdale Hospital, Toronto; Mrs. Mill Pellatt, 36 Jackes Ave., Toronto; Miss M. Ewing, 295 Sherbourne St., Toronto; Miss Eastwood, 206 Spadina Ave., Toronto; Mrs. Clutterbuck, 148 Grace St., Toronto; Miss Jean C. Wardell, R.N., 84 Delaware Ave., Toronto; Miss Eunice H. Dyke, City Hall, Toronto; Mrs. Yorke, 400 Manning Ave., Toronto; Miss G. L. Rowan, Grace Hospital, Toronto; Mrs. MacConnell, 127 Major St., Toronto; Miss Mary Gray, 505 Sherbourne St., Toronto; Miss J. G. McNeill, 52 Alexander St., Toronto; Miss C. E. De Vellin, The Alexandra Apts., University Ave., Toronto; Miss E. M. Norris, 82 Isabella St., Toronto.

Conveners of Standing Committees: Legislation, Mrs. Paffard; Revision of Constitution and By-Laws, Miss Dyke; Press and Publication, Mrs. Struthers. Representative to The Canadian Nurse Editorial Board, Miss E. J. Jamieson.

The members who were not able to be present at the annual meeting will have read, with interest, the splendid papers given there, which were fully reported in the July issue of The Canadian Nurse. It is taken for granted that every member is a subscriber, and therefore, will have a copy of the report.

New plans, new methods of work will suggest themselves as you read and study. Let not these be lost in space, but note them, present them to the officers, have them discussed, and thus will be developed a splendid co-operation, without which our work lacks that co-ordination which spells efficiency and makes possible the best results.

THE ALUMNAE ASSOCIATION OF THE HAMILTON CITY HOSPITAL TRAINING SCHOOL FOR NURSES.

President—Miss Coleman, 171 James St. South.

Vice-President—Miss Dressel, 58 Charlton Ave. East.

Recording Secretary—Miss M. E. Dunlop, 175 Charlton Ave. East.

Corresponding Secretary—Miss E. F. Bell, 274 Charlton Ave. West.

Treasurer—Mrs. Reynolds, 143 James St. South.

"The Canadian Nurse" Representative—Miss Bessie Sadler, 100 Grant Avenue.

The Alumnae Association held its annual picnic for the graduating class, in Dundurn Park, June 14th. There were forty-four present.

Misses Madden, A. Carscallen, Kennedy, Emerson and three pupils of H.C.H., compose the nursing staff appointed to go with the cadets at their Niagara Camp, July 7-8-9th.

Miss Lanaway, one of the staff of Dr. Bull's Private Sanitarium, New York, is spending a few weeks in Hamilton, en route to her home in Woodstock.

Miss Hippel leaves in July for Stockbridge, Mass., to meet a patient, with whom she expects to travel for two years on the Eastern Continent.

Miss Dalglish, Assistant Superintendent of the hospital in Scott, Sask., is holidaying at her home in Woodburn, Ont.

Miss Tory, Night Supervisor of the H.C.H., is taking a month's vacation. Miss Scarlet is substituting.

Miss Dow, nurse in charge of two wards in Woman's Hospital, New York, is enjoying a month's rest at her home in Hamilton.

Miss Wright received a sudden call to her home near Guelph, owing to the illness of her father.

Miss Lillian Tobias has resigned her position as nurse in charge of Ridley College, and Miss Ida Carr will occupy it for next term.

Miss Grant, who underwent an operation on July 3rd, at H.C.H., is making a very favorable recovery.

The engagement is announced of Miss Lillian Tobias, Class '08, to Mr. Herbert J. Flynn, M.A., of Ridley College, St. Catharines, Ont.

In the Queen Alexandra ward of H.C.H., a daughter was born to Dr. and Mrs. Mellwraith (nee Miss Ida Howard, Class '01).

In the Portage La Prairie Hospital, a son was born to Mr. and Mrs. Machan (nee Miss Summerfeldt, Class '05).

The best wishes of the Graduates of H.C.H. go with Miss Margret Barwick, Class '12, who became the wife of Mr. Edgar Dickinson, of Schenectady, N.Y., on June 25th, 1913.

At the June meeting of the Alumnae the time for meeting was changed from evening to afternoon, for balance of year, to ascertain which time is most convenient for the majority of nurses.

THE CANADIAN NURSES' ASSOCIATION AND REGISTER FOR GRADUATE NURSES, MONTREAL.

President—Miss Phillips, 43 Argyle Ave.

Vice-Presidents—Mrs. Petrie and Miss Dunlop.

Secretary-Treasurer—Miss Des Brisay, 16 The Poinciana, 56 Sherbrooke Street West.

Registrar—Mrs. Burch, 175 Mansfield St.

Reading room—The Lindsay Bldg., Room 319, 517 St. Catherine St. West.

Miss Phillips has returned from her visit at Watertown, N.Y.

Miss Barnard, Lady Superintendent of The Children's Memorial Hospital, left last week to spend the summer in England.

Miss F. Thomson, who has been abroad for some weeks, is expected home in a few days.

We are glad to hear that Miss Smardon, who has been ill for some time, is able to take duty again.

The Lancet gives the following regarding "The Regina Elena Nursing School," Italy:

"On March 31st, in the reception hall of the Quirinal H. M. Queen Elena presented their diplomas to the 16 nurses who have completed their two years' training, and personally pinned upon their breasts and upon those of the nine English nurses who have served for two years as teachers in the school, a silver medal struck for the occasion. H. M. the King was present at the ceremony, with several of his ministers, and a large company representative of the society of the capital and the professional world. The school, which now numbers 55 probationers, is under the direction of Miss Dorothy Snell and other English nurses. It owes its institution to the initiative of Queen Elena, whose personal example after the earthquake of December, 1908, has done much to raise the status of nursing in Italy."

SOCIAL SERVICE AND HOSPITAL EFFICIENCY

By Helen R. G. Reid, B.A.
Director, Social Service Department of the Victorian Order of Nurses, Montreal.

(Continued from July issue.)

Hospital Social Service, not then called by that name, started as long ago as 1791, in the London Hospital in Whitechapel Road. A Nurse with three Assistants has had charge of the work there for the last twelve or fourteen years. It was taken up in the Massachusetts General Hospital in 1905, with one worker, at a desk in a corner of a corridor. There are now 22 workers, 24 volunteers, and 15 student volunteers in the wards, and three clinics, and the sum of $15,500 was last year expended on salaries, supplies and special purposes. Since then great interest in the subject has been created, and forty or fifty hospitals have established the service. Bellevue Hospital, New York, has now a staff of 35 workers in the wards, two clinics and offices, besides special volunteer committees in eight departments. The Boston Dispensary inaugurated Social Service in 1909, and the staff now consists of 9 regular workers, 8 student workers, and 4 volunteers, $6,000 being the item of expense for this department taken from the General Dispensary account.

A point has been raised as to the advisability of outside philanthropic agencies providing Social Service for hospitals. Dr. Cabot and Mr. Michael Davis endorse in their reports the following views on this subject of Miss Wadley, Head Worker in Bellevue Hospital, N.N.:

"In asking financial support, and even in admitting their patients, do not hospitals tacitly guarantee to do everything possible to effect a cure? If, then, the medico-social clinic and social workers are positively needed to that end, is it not the hospital's plain duty to establish and maintain that department, just as much as it now maintains its drugstore and its ward Nurses or its X-ray room?

"And this duty is not accomplished when a hospital accepts such a service from some philanthropic organization—the closest co-operation there must be with all such—but to accomplish the best work the impulse and direction must come from within the hospital itself, from its medical staff, if possible, or from its Superintendent.

"It is a therapeutic undertaking and needs medical understanding for its direction and execution, and as such should be dignified by being made a department of the institution—otherwise such a service must fail of its highest achievement."

Mr. Davis says: "The intimate relation between the clinical physician and the Social Worker cannot be developed unless the Social Service were supervised by the management as an integral part of the administrative system of the institution."

For the following suggestions re Hospital Efficiency and frequent verbal treatment, my acknowledgements are due to Mr. Michael M. Davis, Ph.D., Director of the Boston Dispensary (42,000 out-patients in 1912); to Dr. Richard C. Cabot, chairman of the Social Service-Department of the Massachusetts General Hospital (40,000 patients in out-clinics in 1912); to Dr. C. Morton Smith, of the Boston Dispensary; to Dr. Menass Gregory and Miss Mary Wadley, of the Bellevue and Allied Hospitals of New York.

Hospital cures cannot be effective if patients are turned out of ward beds too soon in order to make room for worse cases than their own, or if they require subsequent treatment which they are not in a position to follow. After-care is needed to prevent John X. from progressing from one hospital ward, where his diagnosis was pneumonia, to another ward or hospital with a diagnosis of tuberculosis, all for the want of an overcoat, perhaps, when he left the ward in the very early stage of convalescence. If the Social Worker is not at hand to help James S., surgical case, discharged as improved but needing dressings, what is to become of him, living alone, unable to work, with room rent over-due? Even if he were able to work, what employment would admit of his taking practically three half days a week to wait sometimes two hours for his turn in a crowded clinic? Here we have a vagrant in the making, unless he has the proper nourishment to build him up and means are found to house him and let him take his treatment. Half measures are sheer waste, and a case should be seen through to a practical conclusion. Each disease and each individual requires different social as well as medical treatment, and kindly common sense must supplements the doctor's orders. Cases of tuberculosis, perhaps, need to be placed in institutions or under class treatment. They may require home nursing or mountain air, and the patient or family may need to be supported during the time of treatment. Precautions must often be taken against contagion—new cases are frequently found during

visits to the home and investigation of conditions there. Help may be needed in finding or changing work for cases of discharged tuberculosis, typhoid, alcoholism, heart disease, industrial diseases, chronic joints, etc., and the general work if instruction in hygiene of the person and home has always to be pressed by a social worker in order to supplement the work of the doctor in the ward or clinic. Here we have poor William M., ill for two years with abscess and subsequent amputation of the leg. He needs strengthening food and, later, a $100 wooden leg to enable him to fill the position that is waiting for him. Little Jane F. needs glasses or a brace—the family are too poor or ignorant to realize the importance of this. The social worker is successful in educating them to the right point of view, perhaps has to assist them, and Jane becomes a valuable working member of society instead of a half-blind discouraged woman or cripple.

Similar service may be rendered to cases in the outdoor clinics of hospitals or dispensaries. In the three cities of Boston, New York and Chicago, the out-patient departments and reputable dispensaries are providing for fully 2,500,000 people (45 p.c. of the population of Chicago, and in Boston and New York 1-3 p.c.) and are expending annually at least $1,500,000. In the country as a whole, millions of dollars are thus spent. Practically nothing has been done, however, to estimate achievements in relation to expense—to compare results with the cost. An out-patient clinic diminishes its efficiency and wastes a large part of its time and money in examining patients who never come back for treatment. Thousands of dispensaries now treating disease are still content to assume that if the patient does not come back after the first visit, he is probably cured.

As Dr. Cabot, of the Massachusetts General Hospital says: "This is like supposing that a school boy who never comes back after the opening day of school is staying away because he is cured of all ignorance and possessed of all knowledge." The frequency and regularity of patients' return are undoubtedly affected by the length of time they have to wait; the pleasantness or curtness with which they are treated by the employees of the institution; the clinical routine, the amount of privacy during examination, the number of personal questions asked, and the tact and skill with which such information is sought. Even objects of charity are human beings. Mr. Michael M. Davis, Director of the Boston Dispensary, says in this connection: "If we would realize our ideal of treating not only diseases, but men, women, and children, one of the practical things to do would be to see that the rules and general routine of out-patient clinics are adapted to patients as well as to administrative convenience. The particular blindness of a medical institution is to see diseases instead of persons—a series of more or less abnormal, and therefore interesting, limbs,

eyes, livers, and hearts, incidentally connected with human beings. We need to have the eye that sees people as well as disease. The patient must be looked upon as a human being, a member of society, and results are to be judged by the improvement produced in his health, his working and living efficiency as a member of a family." In a study of clinical efficiency last year, in the children's clinic of the Massachusetts General, Dr. Cabot found "That out of 779 patients, 57 per cent. of miscellaneous cases had only one visit, 50 per cent. of children with bronchitis never come back, 45 per cent. with chorea made only one visit, and so on through a list of seven other diseases. Many of these children were doubtless cured, but only a second visit can enable us to be sure of this. They may have died, they or their parents may be too indifferent, too busy, or too ignorant to carry out the treatment, or they may have gone to other hospitals or private doctors. Without a home visit or a second visit to the clinic it is impossible to be sure that the bronchitis has not turned out to be tuberculosis, that the choreic child has been kept sufficiently quiet without making it neurasthenic."

Besides curing acute illness, training nurses, advancing scientific research and teaching medical students, hospital efficiency must now include the meeting of the problems of after-care; remedying home conditions which cause disease, instructing patients in hygiene and educating the public to co-operation with physicians. This huge wheel of hospital efficiency is kept moving onward by the stream of public benevolence which supports the hospitals, and if any of the spokes or paddles are missing, the energy of the stream is wasted.

The social worker's task in ward and clinic is to fill up the holes in medical work, and to make that work tell permanently. She has to meet the problems of patients' lives which, running alongside their physical condition, affect powerfully the continuity and practicability of adequate medical treatment. The follow-up care given by the social worker is the most important step in assisting in carrying out treatment and in seeing that patients return to get treatment. The physician, has as a rule, neither the training nor the time to grapple with the conditions of poverty, industry and personality which lie behind a large proportion of the diseases of patients. Unless they are dealt with, however, neither patient nor physician can expect to get satisfactory results, and there is a good reason why the patient does not come back. The pressing medical work of diagnosis, teaching, and treatment, demands the whole time of the doctor, and yet, perhaps, because of ignorance, or home conditions inimical to the health of the patient, the cure will be only temporary, and the expense to the hospital, the work of the doctor and the burden on the charitable community will increase with each recurrence of illness, while the

suffering of the patient is prolonged and the country loses a healthy and profitable citizen. And so, while recognizing the fact that the cure of disease is a public necessity, it has been borne in upon hospital authorities and doctors that the prevention of disease is not only a public economy and benefaction, but an economy which closely concerns their own institution—and that the responsibility of a modern hospital includes social service as well as medical—the after-care of patients in their homes to prevent relapse as well as cures in the wards or clinics.

Dr. Cabot says of the Mass. Gen. Social Service, "Not until this year (1912) have workers been put in the clinics. That means that the workers had to take what cases were sent them, the medical men had to make the social diagnosis among the 40,000 sick people who visit the clinics annually, as well as teach the students, diagnose cases, and advise treatment. Now the social worker is in three clinics where she can see all the patients and select those most in need of what she can give. Furthermore, she can limit her intake according to her powers, and put her strength and knowledge where it will do most good." He adds, "Some of the hospitals which followed our lead in establishing social work, improved on us, for they put social workers in the clinic from the start. Bellevue Hospital, New York, did this in 1906, and the Boston Dispensary, in 1909. We have learned from them, and are now following their lead in method as they first followed ours in conception." Mr. Davis, of the Boston Dispensary, says: "Social workers must be placed in the clinics and in the hospital wards, so that they can come into first-hand contact with the doctor and patient together. Nurses and social workers must pull together, and, when not combined in the same individual, the problem of adjusting their functions in the clinic is, and will be for some time, a delicate one."

This brings us again to the question of the worker herself. Dr. Menass Gregory, of the Pyschopathic division of Bellevue Hospital (12,000 ward admissions and 4,200 out-patients in this one division in 1912), speaks of the worker in these words: "A hospital social worker, in addition to enthusiasm, broad sympathy, optimism, energy, tact and resourcefulness—qualities of prime important for the work—should possess some training in physiology, hygiene and therapeutics, some insight into normal and abnormal psychology, as well as some knowledge in social and domestic science. A social worker should not be selected merely because she has had the training of a nurse, but if she have the essential qualities and native ability needful for the social worker, her training as a nurse will greatly enhance her usefulness."

For those who say they have no use for social service and do not

like it, I will simply quote, in closing, an anecdote told of Charles Lamb. A friend said, "Come here, I want to introduce you to Mr. A." Lamb replied, with his characteristic stammer and drawl, "No, thank you." "Why not?" "I don't like him." "Don't like him? You don't know him!" "That's the reason I don't like him."

HOSPITALS AND NURSES.

Miss Florence Mills, Graduate of St. Luke's General Hospital, Ottawa, is doing private nursing in Cobalt, Ont.

Miss Clarice K. Stewart and Miss D. Eva Bradley, R.V.H., Class '10, after spending the winter in Los Angeles and San Francisco, have gone to Japan to spend the summer months.

Miss A. L. Bradley, Jeffery Hale Hospital, Quebec, Class '09, spent the winter in Venice, and Los Angeles, Cal.

Miss Elizabeth McLeish and Miss Etta McLeay, both Graduates of the Hamilton City Hospital, have taken the Harbour View Sanitarium at North Vancouver. This little hospital has 19 beds, mostly private and semi-private rooms.

Miss Grace Hastie, Graduate of Vancouver General Hospital, is Superintendent of the Diamond Jubilee Hospital, Fort Steele, B.C. Miss Frances Bond, V.G.H., is doing private nursing in Nelson, B.C.

Miss McDonald, Superintendent of Nurses of the Royal Jubilee Hospital, Victoria, B.C., has resigned. Her resignation took effect July 1st.

Miss W. G. McLeod (Pres. Hosp. Chicago) Social Service Nurse in Vancouver, B.C., is leaving for England the first week in July, for two months' leave of absence. Miss McCartin (V.G.H.) will take her work while she is away.

Collingwood, Ont.—Miss Kate Spearing, G. & M. Hospital, Class '11, and Miss Margaret Morrow, Class '12, have gone to Port Arthur to take up private nursing.

Miss A. R. W. Moore, who has been at the Telegraph Creek Hospital, B.C., is the guest of Mrs. Mecham. The nurses are all glad to welcome Miss Moore.

Mrs. Arthur, Honorary member of the Alumnae Association, gave a tea on June 30th, in honor of Miss Moore.

Miss J. Shaw, who was nursing small-pox in Meaford, is out of quarantine.

The annual meeting of the Alumnae Association of the Collingwood G.&M. Hospital was held in the Board room of the hospital on May 29th. The following officers were elected: President, Miss E. M. Dawson;

First Vice-President, Miss Robertson; Second Vice-President, Miss McColloch; Secretary-Treasurer, Miss Carr; Assistant Secretary-Treasurer, Miss Shaw; Sick Visiting Committee, Misses McDonald, Rainey, Burholder.

On Tuesday, June the 3rd, the annual picnic of the Alumnae Association was held in Victoria Park when a very enjoyable time was spent by all present.

On Saturday, June the 7th, Mrs. Meacham, President of the Hospital Board, gave a very enjoyable afternoon tea.

Miss Moore, Graduate of the Collingwood General & Marine Hospital, who has been in the Missionary Hospital at Telegraph Creek, B.C., for two years, is holidaying at home in Orono, Ontario.

Miss S. H. Dawson, Graduate of Montreal General Hospital, and Miss Morrow, Graduate of G. & M. Hospital, Collingwood, are holidaying in Rosseau, Muskoka.

Mrs. Fouriner, R.N., Gravenhurst, Treasurer of the Canadian National Association of Trained Nurses, who was attending the meetings of the W.C.T.U. convention in Collingwood, was ,on her departure, presented with a boquet of sweet peas by the Alumnae Association.

The first Graduating Exercises in connection with the Welland County Hospital were held in McCuaig Hall on the evening of June 11th, when three nurses received their diplomas—Misses Vida O'Neill, Annie O. Jenkins, and Pearl E. Morrison.

The Hall was beautifully decorated in red and white, the hospital colors, and the platform banked with cut flowers, ferns and palms.

Mr. E. Morris, President of the Hospital Board, occupied the chair. Addresses were given by Hon. R. Harcourt, Mr. J. D. Cowper, Dr. Colbeck, who addressed the graduates, and Rev. Mr. Kerr. The diplomas were presented by Miss Regan, Superintendent of the hospital. Mrs. Spencer presented beautiful bouquets to each graduate, and Mr. Morris presented the pins. Musical numbers, which added much to the charm of the program, were rendered by Mrs. Heslop, Mrs. Thomas, Miss Reilly and Miss Bradshaw.

At the close of the exercises the guests were invited to a dainty luncheon served by the Women's Hospital Auxiliary. This brought to a happy close a most memorable function.

The Jeffery Hale's Hospital Training School, Quebec, held their graduating exercises on the afternoon of June 23rd, when three nurses were presented with their diplomas—Miss Lottie Bethune, Lancaster, Ont.; Miss Bertha Cromwell, Cookshire, P.Q.; Miss Mabelle Jamieson, Campbelltown, P.Q. Addresses were given by Dr. Stevenson, who spoke to the class of their future duties; by Mr. Gus. Stuart, who spoke very feelingly to the nurses and referred to the pleasant experi-

ences he had had with nurses called into his home in a period of illness, saying he never would forget the kindness and the gentle manner in which they performed their duties; also by Mr. J. Hamilton.

The President, Mr. J. T. Ross, awarded the diplomas, and Mrs. J. T. Ross presented the pins.

Music was furnished by the R.C.G.A Band on the lawn in front of the hospital, and a reception and refreshments followed, attended by many relatives and friends of the graduates.

The annual graduating exercises in connection with the Orillia General Hospital were held in the Methodist schoolroom, on Tuesday evening, June 24th. There was a large gathering. Dr. Beaton presided, and in his opening remarks paid a high tribute to the work done by the Orillia Hospital. The graduates are: Misses Anna M. Seeler, Carrie M. Robinson, Mary A. Wood, Katie S. Whiting and Annie M. Dudenhoffer. The nurses were presented with their diplomas by the chairman, and with their pins by Mrs. Todd, President of the Women's Auxiliary. Beautiful bouquets of flowers were also given to the graduates, and to Miss Johnston, the Superintendent.

The prizes were awarded as follows: Miss Seeler, first prize for massage, given by Miss Johnston; Miss Woods and Miss Dudenhoffer, equal for second prize for massage, given by Mrs. Geo. Thomson and Mrs. J. B. Tudhope; Miss Whiting, Dr. A. R. Harvie's prize for best paper on surgery; Miss Seeler, Dr. A. E. Ardagh's prize for best paper on gynecology; Miss Robinson, Mrs. Hamilton's prize for neatness and efficiency in ward work; Miss Seeler and Miss Whiting, equal for Mrs. Todd's prize for highest total marks; Miss Wood and Miss Whiting, equal in obstetrics, prizes given by Mrs. G. H. Clark and Dr. Gilchrist.

Miss Johnston, in her annual report, urged the need of a larger hospital with modern equipment to enable the staff to render more efficient service.

Addresses were given by Mayor Goffatt, Rev. C. M. Marshall, Rev. F. W. Anderson, Mr. G. H. Clark and Mr. M. B. Tudhope.

During the evening, an excellent musical programme was contributed by Miss Bowen and Master Clifton Stewart, Miss Emma Tudhope, Miss Sinclair, Mrs. F. W. Anderson, and Mr. Merton Plunkett. Miss Queen Beaton acted as accompanist.

The Graduating Exercises of Class 1913 took place on June 10th, in the Nurses' Home of the Medicine Hat General Hospital, in the presence of a large gathering of friends.

The nurses graduating were: Misses Annie Murray, Alexandra Moore, Annie Frazer, Nellie Scoville, Edna Stewart, Ella Willet and Elizabeth MacDougall.

Mr. Henry Stewart, President of the Hospital Board, presided.

After congratulating the graduates and Miss Winslow, Superintendent of Nurses, and her assistant, Miss Auger, he paid a high tribute to the nursing profession, and said that the work of the Medicine Hat General Hospital had won the interest and sympathy of the residents of the city and surrounding community. Mr. Stewart presented the diplomas, and Miss Winslow pinned on the medals. The prizes were then presented by the Secretary of the Board, Mr. R. W. Napier.

For General Proficiency, presented by Board of Directors—1st, Miss Nellie Scoville, 2nd, Miss Alexandra Moore.

Surgery, presented by Dr. C. E. Smyth—Miss Nellie Scoville.

Practical Work, presented by Dr. F. W. Gershaw—Miss Annie Murray.

After an interesting speech in which he paid a high tribute to the graduating class for the manner in which they had coped with and overcome the difficulties encountered in their training, Dr. Smyth, Medical Superintendent, presented, on behalf of Mr. H. Stewart, each of the new graduates with a large bouquet of roses.

Appropriate speeches were given by the mayor of the city, Mr. Nelson Spencer, M.P.P., Ex-Mayor Cousins, Mr. W. Huckvale, and Alderman Brown.

During the evening excellent musical selections were rendered by local talent.

Refreshments were served on the spacious verandahs and lawn, after which a short dance brought a pleasant evening to a close.

Medicine Hat, Alta., is to have a new General Hospital to contain 250 beds, thoroughly modern and of fire-proof construction, to be erected on new site acquired by Hospital Board.

Very general regret is expressed over the resignation of Dr. C. E. Smyth, as Medical Superintendent of the hospital. This step has been rendered necessary by his very large private practice, and the rapidly increasing work in the hospital requiring more time than is possible for him to give. Dr. Smyth has been closely identified with the general hospital for the past 17 years, and a large measure of its splendid success is due to his untiring interest and work, and he will continue to take an active interest in hospital affairs.

A new Superintendent will be appointed who can give his entire time to hospital work, and will also take charge of the X-Ray and Pathological departments that are being added to the institution.

Despite the threatening weather a very large crowd gathered in the spacious men's ward of the Ottawa General Hospital, which was transformed into a most beautiful convocation hall, by brilliant flowers and gorgeous bunting, for the graduation exercises of the eleventh

and largest class since the opening of the training school. Twenty young ladies received the medals and diplomas of the institution.

Dr. R. Chevier acted as Chairman, but had little need to introduce the well known speaker of the day, Dr. J. L. Chabot, who extended the congratulations and good wishes of the members of the staff to the graduates in a clever but brief speech.

After a musical number by the Orchestra, Mrs. Allard, Acting President of the Ladies' Auxiliary, presented the diplomas, and Miss Isabel MacElroy, President of the Nurses' Alumnae, presented the special prize donated by the association for highest percentage to the happy winner, Miss Lancaster, of Chartrand, Ont., and pinned medals on the following:

Sister St. Zenobia; Misses Catharine Costigan, Ottawa; Gladys Bliss, Ottawa; Anna Simard, Renfrew, Ont.; Margaret Rowan, Ottawa; Helen Carrol, Ottawa; May George, Eganville, Ont.; Anna Murphy, Renfrew, Ont.; Muriel Story, Ottawa; Maud Daly, Brockville, Ont.; May Gorman, Buckingham, Que.; Ethel Kilkelly, Monkstown, Ireland; Mary Lancaster, Chartrand, Ont.; Celina Bisson, Sudbury, Ont.; Valeda Gravelle, Ottawa; Eglantine Bourcier, Ottawa; Ella Rochon, Maniwake, Ont.; Nellie Butler, Ottawa; Laura McCloskey, Chelsea, Que.; Theresa Foran, Ottawa.

Miss May George won the prize for highest percentage in Surgery, donated by a friend of the hospital.

Rev. W. Stanton, of the Ottawa University, was the second speaker and gave a very interesting account of the treatment a patient receives on addmittance to the hospital. Speaking from his own experience in that capacity, his reminiscences were highly amusing and very realistic. He offered congratulations and best wishes on behalf of the clergy. In conclusion he urged the nurses amidst their strenuous duties, and often numerous temptations to be faithful always to their religion. This, Father Stanton affirmed, would be an unfailing source of strength and courage. A farewell song by Miss Gravelle, one of the graduates, brought the pleasing programme to a close.

The numerous guests were afterwards entertained in the lecture hall, where dainty refreshments were served by the ex and present pupils of the hospital, and the graduates received the personal congratulations of their many friends.

A very large number of the prominent clergy, sisters, medical men and residents of Ottawa were presents as well as all the staff doctors and interested friends of the hospital.

The last regular meeting of the Alumnae of the O. G. H. before the summer vacation, was held on Friday, May 2nd. A large number

of the members were present, and after the regular business was transacted, Dr. J. L. Chabot gave a most interesting lecture on "Modern Methods in Surgery and Anaesthetics and After Care of Surgical Cases." Miss MacElroy, the President, presided, and passed a vote of thanks to the Lecturer. The Senior Class of the Hospital were guests to tea afterwards, and a most enjoyable social hour was passed.

Sister M. Daniel, nurse-in-charge of operating room, and Sister Afra, nurse-in-charge of laboratory of the O.G.H., have left on a three weeks' visit to the Mayo Bros.' Hospital at Rochester, and on their return journey intend visiting at the Murphy Hospital, Chicago.

Miss Stella Mulroney, Class '06, O.G.H., has entered the Convent of the Sisters of the Blessed Sacrement at Cornwells, Pa.

Miss Katharine Byrnes, Graduate O.G.H., Class '10, has left for Fort William, to be the guest of her brother, Mr. E. Byrnes, for the summer months.

The Graduating Exercises of the twenty-eighth class of the Training School of the Hospital for Sick Children, Toronto, were held in the Residence on the evening of May 27th, 1913. Mr. J. Ross Robertson, Chairman of the Hospital Board, presided. Mr. McCausland offered prayer. The report of the Training School was given by Mr. Robertson. Dr. C. K. Clarke, Medical Superintendent of Toronto General Hospital, addressed the Graduating Class, Miss Brent administered the Hippocratic Oath and Dr. F. N. G. Starr presented diplomas and medals.

The following scholarships and prizes were awarded:

Senior scholarship of $50, Miss Dorothy Burwash, Arnprior, Ont.; intermediate scholarship of $30, Miss Hilda Pennock, Mount Forest, Ont.; junior scholarship of $20, Miss Alice M. Grindlay, Toronto; junior scholarship of $20, Miss Annie Copeland, Collingwood, Ont.

Prize for the highest marks in examinations (senior class, 1st division), Miss Charlotte Wallace, Woodbridge; (senior class, 2nd division), Miss Helen Fraser, Bradford, Ont.; prize for the highest marks in examinations of the intermediate class, Miss Elspeth Anderson, Peterboro', Ont.; prize for steady advancement and progress during course, Miss Jessie Wilson, Wingham, Ont.; prize for charting (senior class), Miss Florence Peterson, Toronto; prize for charting (intermediate class), Miss Ruth Sture, Port Arthur; prize for neatest bedroom, Miss Lulu Essery, Crediton.

Many flattering references were made to the retiring Superintendent, Miss Brent, whose fame is worldwide, as she is recognized as an authority everywhere on this continent and across the water. The nurses presented Miss Brent with an armful of American Beauty roses.

The following are the graduates: Misses Gertrude H. McClellan, Lillian I. Rendall, Mabel G. Vickery, Hilda B. Hersey, Dorothy A. Reade, Efie L. Cook, Harriet C. Wallace, Margaret G. Andras, Dorothy Burwash, Jean Maus, Helen R. Fraser, Florence Peterson, Grace J. Ferguson, Margaret McAlister, Elizabeth Dingwall, Eleanor Butterfield, Wilhelmina M. Armstrong, Muriel E. Davies.

After the program Miss Brent held a reception, assisted by her staff and Mr. J. Ross Robertson. An informal dance, when refreshments were served in the dining-room, brought one of the most brilliant and enjoyable commencements to a close.

The closing exercises of the thirteenth graduating class of the training school for nurses was held in the new wing of the Vancouver General Hospital, on June 18th, and was attended by a large gathering. The room was decorated with pink and white roses, sweet peas and carnations. Dr. W. B. McKechnie acted as chairman, and gave a short opening address. Dr. Proctor delivered the address to the graduating class. He congratulated them upon having graduated from what he considered one of the finest hospitals in Canada. He reminded them of the high standard set for nurses, and exhorted them to live up to the best ideals of the profession. In closing he assured them of kindly interest and best wishes for their future success. Mr. Campbell Sweeney, Honorary Chairman, was present, and gave a few remarks. Dr. McKechnie presented the diplomas, and Mrs. A. H. Wallbridge presented the pins. The members of the class are: Miss Margaret McGregor, Miss Mabel Adamson, Miss Ethel Boultbee, Miss Anna Bruce, Miss Esther Duff, Miss Matilda Ostrom, Miss Emily Gibbons, Mrs. Maude Buttle, Miss Eleanor Charles, Miss Gladys Currie, Miss Josephine Walsh, Miss Charlotte Matthews, Miss Margaret Rose, Miss Nellie Carter, Miss Helnin Rice, Miss Edna Guillod, Miss Isabel Lord, Miss Annie Michie, and Miss Elizabeth Atkinson. Miss Walsh was absent through illness. The medal presented by Dr. R. E. McKechnie for general proficiency was won by Miss Charles. A beautiful bouquet of red roses was presented to the class by the head nurses in the hospital. During the exercises Miss Lougheed gave two solos, accompanied on the piano by Miss Mabel Burritt. After the graduation a reception was held.

Peterborough—The graduating exercises of the class of 1913, of the Nicholl's Hospital Training School for Nurses, were held in the Conservatory of Music Hall on the evening of June 19th. The graduates were: Misses Grace E. Crowe, Sara J. Wood, Elleda B. Walsh. Rev. T. J. Mansell, of Charlotte Street Methodist Church, delivered an inspiring address to nurses, in which he pointed out the possibilities which such a profession offered. Dr. J. M. McCulloch addressed the graduating class in well chosen words. Dr. McPherson made the

presentation of the prize for bandaging, which was won by Miss Crowe. This was followed by affirmation and conferring of diplomas, and presentation of medals. Mr. Richard Hall, Chairman of the Board of Trustees, occupied the chair most genially. A splendid programme was rendered by the Conservatory of Music Orchestra. A reception and refreshments followed the exercises. Miss E. M. Beamish, R.N., is Superintendent of the Nicholl's Hospital.

The Graduating Exercises of the Class of 1913 of the Woman's Hospital, Montreal, took place on April 7th, 1913. Dr. Reddy and Dr. Burnett addressed the Graduates. Mrs. Reddy and Mrs. Burnett presented diplomas and medals, and a club bag from the hospital. At the close of the exercises, the Graduates and guests repaired to the dining-room, where the pupil nurses had prepared a dainty supper—the decorations were in pink, a beautiful basket of pink roses adorning the centre of the table.

The Graduates are: Mrs. Ada Chisholm, Misses Jessie Edington, Kate Martin, Marjorie Kerr, Kate Hart, Eva McBride, Grace Wilson, Gertrude Donkins, Agnes Buse. Miss Buse has gone to New York to take a Post-Graduate Course in the Polyclinic Hospital, the others are doing private nursing in Montreal.

The nurses are comfortably settled in their new home. The members of the Alma Mater Society are invited to make use of the sitting room as a club room or to entertain their friends to tea. The society has provided a complete tea service for this purpose.

We hope all our friends will again assist in making our Autumn Bazaar a success.

Brooklands Hospital, Sydney, B.C., was destroyed by fire on June 18th. The thirty-three patients were rescued without difficulty—twenty were taken to the Lyceum Theatre, the rest to their own homes. The Marine Department has kindly placed their local hospital at the disposal of the steel company.

The annual meeting of the Montreal General Hospital Alumnae Association was held at the Nurses' Residence on April 11th, 1913. The following officers were elected: Honorary President, Miss Livingstone; President, Miss Young; First Vice-President, Miss Dunlop; Second Vice-President, Miss Ethel Brown; Recording Secretary, Miss Strumm; Corresponding Secretary, Miss Wilson; Treasurer, Miss Tedford. Miss Alice Ketchum, Class '10, has left for a trip to England.

Miss Merriman, Class '08, who has been ill, has left the hospital and is staying with her sister, Mrs. Workill, in Sherbrooke, Quebec.

Miss Margaret Fortesque, Class '05, has taken the position of Lady Superintendent of the Lachine Hospital, succeeding Miss Baikie.

We extend our sympathy to Miss Brittain, Class '12, for the loss of her father, who died very suddenly of pneumonia.

Miss Elizabeth Munroe, Class '96, has been appointed to a new position in the out-door department of the hospital.

Miss Urquhart, Class '13, is taking charge of the Hospital Diet Kichen for the summer months.

Miss Margaret Templeton, Class '10, and Miss Whitney, Class '13, are sailing this month to spend July and August in England.

Miss Gertrude Vipond, Class '11, is taking charge of the Children's Memorial Hospital, Montreal, while Miss Barnard, Superintendent, is in England.

Miss Margaret McFarlane, M.G.H., Class '10, is taking Miss Webster's place as Night Superintendent for July and August. Miss Webster, who has been ill, is going to her home in Cobourg, Ont., for a rest.

A hospital for the insane is to be erected at Selkirk, Man.

The Toronto Housing Company, Limited, laid the corner stone of its first building on June 26th, 1913. Sir John Gibson, Lieutenant-Governor of Ontario, performed the ceremony.

On Wednesday, June 25th, the Mayor of Edmonton, Alta., laid the corner stone of the new University Hospital.

The hospital, in addition to some 90 beds, will have an out-patients' department, and also a properly equipped roof garden for the benefit of convalescents and others not wholly confined to their ward. The building finished and furnished will represent an investment of something like $250,000, and in its construction and equipment will have very few superiors in the whole of the Dominion.

The Ladies' Hospital Aid served refreshments. The Hospital Commission hopes the hospital will be ready for the reception of patients in January, 1914.

West Toronto is preparing to erect a hospital to be known as the Howard Park Hospital—a memorial to the donor of High Park.

The new Hospital for the Insane, at Whitby, Ont., to take the place of the one on Queen St. W., Toronto, so admirably situated on a huge farm of 640 acres fronting on Lake Ontario, will be a boon to the mentally afflicted. The out-door life and interests will help greatly in the work of restoration.

A great deal of the work is being done by prisoners from the Guelph Prison Farm.

The location for the buildings of the new hospital, in fact the

entire place, is admirably situated. The farm lies immediately to the west of the town of Whitby, fronting on Lake Ontario, sloping gently from the north-west to the lake shore. The soil for the most part is clay, but there is about twenty acres of sandy loam suitable for gardening. The main grouping of the buildings will be on a slight rise with a south-eastern exposure. A picturesque design of stucco with red tile roofs has been adopted. The site chosen for the buildings has great natural beauty. The slope is dotted here and there with hedges, orchards and shade trees. A splendid group of pines to the west will afford a break for heavy lake winds.

The buildings are being arranged on the unit system of cottages, with one central administration building. Shrubbery and garden surroundings will be so arranged that not more than two cottages will be seen at one view, the whole being intended to create a cheerful, home-like atmosphere. The present plans, when completed, will provide accommodation for 1,500 patients, and are so arranged that additional units of 500 each may be added without conflicting with the original construction.

The regular monthly meeting of the Alumnae Association of the Toronto General Hospital Training School for Nurses was held in the Nurses' Parlor on the afternoon of May 2nd. Mrs. Feeny, President, occupied the chair. After the disposal of business, those present had the pleasure of listening to an address by Miss Batty, Class 1891, who has been engaged in hospital and missionary work in Shanghai, China. The difficulties of the worker in China are many. The custom of ancestral worship makes the study of anatomy impossible, hence the ignorance of the Chinese regarding the care of the body in health or disease. The work is progressing slowly, ignorance is giving place to knowledge. Miss Batty's earnestness impressed her hearers, for whose prayerful support she asked. Miss Batty had a number of surgical instruments which are used by the Chinese.

The monthly meeting of the Vancouver Graduate Nurses' Association was held at the Nurses' Club, Wednesday, April 2nd, at 8 p.m.

There were nineteen members present, Miss Trew, President, in the chair.

The minutes of the last meeting were read and adopted.

Secretary-Treasurer's report showed a balance of $142.93, and a balance for the Sick-Benefit Fund of $445.15.

Three members were elected to an Executive Committee, viz.: Miss Bone, Miss Blakeney and Miss Gillies.

Motion of amendments to the constitution were voted on and carried.

There was a discussion on the arrangement of the programme

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for the entertainment of the Graduate Nurses' Association of British Columbia, for its annual meeting, to be held June 13th and 14th, in Vancouver. Final arrangements were placed in the hands of the Social Committee.

The meeting then adjourned, and tea was served.

The Graduate Nurses' Association of Thunder Bay District, at its May meeting, decided after some discussion "that the work of City Nurse and School Nurse are two separate positions requiring two nurses."

Miss Regan and Miss Blackmore were appointed Delegates to the Canadian National Association of Trained Nurses, which met in Berlin, Ont.

Miss Blackmore gave a talk on "Experiences of a District Nurse."

MARRIAGES

Struthers-Rogers—At High Park Presbyterian Church, Toronto, on July 9, 1913, Miss Lina L. Rogers, Superintendent of School Nurses, Toronto, and President of The Canadian Nurse Editorial Board, to Dr. W. G. Struthers, B.A., Chief Medical Inspector of Schools, Toronto. Dr. and Mrs. Struthers will reside at 558 Bathurst St., Toronto.

Lutes-Betchel—At Waterford, Ont., on May 24th, 1913, Miss Lestella E. Betchel, Graduate of General Hospital, Galt, Ont., Class '00, and Post-Graduate of General Memorial Hospital, New York, '02, to Mr. Alonzo Lutes, of Hamilton, Ont.

McGarry-Chandler—At Vancouver, B.C., June 12th, Eleanor Edith Chandler, (V.G.H.), to J. H. C. McGarry, of Montreal.

Gregg-Marshall—At St. Andrew's Presbyterian Church, Vancouver, B.C., on April 16th, Miss Isabel H. Marshall, of V.O.N. staff, Victoria, B.C., to Mr. Arthur M. Gregg, Victoria, B.C.

Morphy-England—At All Saints' Church, Niagara Falls, Ont., on May 6th, Miss Ethel Louise England, School Nurse, to Mr. Harcourt John Morphy.

Campbell-Killaly—At St. Paul's Church, Bloor St., Toronto, on June 9, 1913, by Ven. Archdeacon Cody, Miss Amy Constance Killaly, Graduate of H.S.C., Toronto, to Mr. Lorne MacIvor Campbell. Mr. and Mrs. Campbell will reside in Haileybury, Ont.

Galloway-Shier—On March 26, 1913, Miss Ida May Shier, Graduate of Grace Hospital, Toronto, to Mr. Galloway, of Toronto. Mr. and Mrs. Galloway are at present residing at 794 College St., Toronto.

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"The Immediate Care of the Injured," by Albert S. S. Morrow, M.D., Attending Surgeon to the Work-house and to the New York City Home for the Aged and Infirm. Octovo of 340 pages, with 238 illustrations. Philadelphia and London; W. B. Saunders Company, 1906. Cloth, $2.50 net.

A volume that contains such information as this, ought to be advertised, not only to physicians, but to nurses and laymen. There is nothing described that a competent medical man does not already know, and to such the book is interesting only as a compilation. The eight chapters on Anatomy and Physiology are elementary in character, and designed especially for lay readers. The directions for bandages, dressings, splints, and emergency measures, are described clearly, in sufficient detail, with many photographic illustrations that greatly aid the text. Everything in both text and picture is familiar and requires no special comment, aside from perfunctory commendation for work well done. The book, or its information, ought to be in the library of every family.

"Opportunities in the Field of Nursing," a pamphlet published by The Nursing and Health Branch of the Alumni Association of Teachers' College, Columbia University, New York. Price 10 cents. In quantities of 20 or more, 5 cents each.

This pamphlet sets forth briefly the Development of the Profession, Scope of the Field, Purpose and Character of Nursing Work, Training Required and How Secured, etc. A most instructive, comprehensive pamphlet which associations should seek to place in the hands of intending students.

"Private Duty Nursing," by Katharine DeWitt, R.N., Graduate of Mount Holyoke Seminary and of the Illinois Training School for Nurses; Assistant Editor of The American Journal of Nursing. J. B. Lippincott Company, Washington Square Press, Philadelphia, U.S.A.

Every page of this book testifies that a successful private nurse is the writer. All the phases of the work of the private duty nurse are intimately discussed, and such advice as only one who knows can give shines forth at every turn. The private duty nurse need no longer stumble upon the knowledge necessary for success, here is a most readable volume of wise, kindly counsel and advice, and many suggestions, all prompted by lessons learned in the school of experience.

"Applied Bacteriology for Nurses," by Charles F. Bolduan, M.D., Assistant to the General Medical Officer, Department of Health, City of New York, and Marie Grund, M. D., Bacteriologist, Department of Health, City of New York; 12 mo. of 166 pages, illustrated; Phila-

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"A Reference Hand-Book of Gynecology for Nurses," by Catharine Macfarlane, M.D., Gynecologist to The Woman's Hospital, of Philadelphia. Second edition, thoroughly revised; 32 mo. of 156 pages, with original line-drawings. Philadelphia and London: W. B. Saunders Company, 1913. Flexible leather, $1.25 net. Canadian agents, The J. F. Hartz Co., Ltd., Toronto.

This book of reference will help the nurse to keep informed on new methods of sterilization, preparation for operation, after care, etc. No nurse can afford to drop behind in this knowledge.

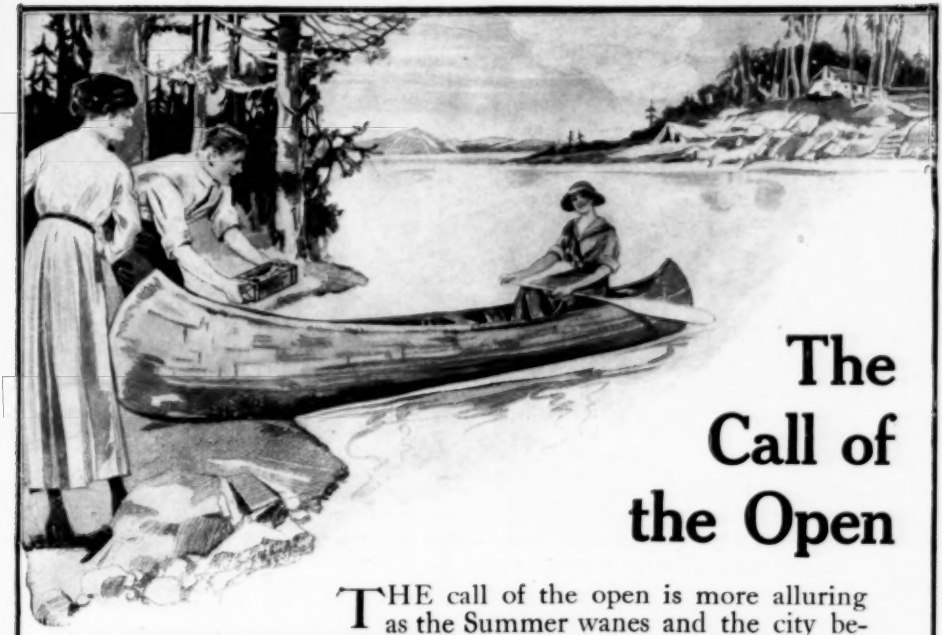
"A Reference Hand-Book for Nurses," by Amanda K. Beck, Graduate of the Illinois Training School for Nurses. Third edition, revised and enlarged; 32 mo. of 229 pages. Philadelphia and London: W. B. Saunders Company, 1913. Flexible leather, $1.25 net. Canadian agent, The J. F. Hartz Co., Ltd., Toronto.

This very complete volume contains up-to-date information for the nurse at every turn—Materia Medica, Infant Feeding, with many valuable formulae, Baths and Packs, Electricity, etc. The book is convenient in size, and would be prized by any nurse wishing to keep up-to-date.

"Manual and Atlas of Swedish Exercises," by Thomas D. Luke, M.D., F. R. C. S., Medical Superintendent Peebles Hydro and Kur Hotel; author of "Massage and Swedish Gymnastics and other Exercises for Masseuses and Nurses," and "Manual of Physiotherapy and Climatology." With 64 illustrations: The Scientific Press, Ltd., 28, 29, Southampton St., Strand, London, W.C., England. One shilling net. A small hand-book for reference.

"How to Read and Write Prescriptions," by Lytton Maitland, M.D., (Lond.), B.S., D.P.H. (Camb.) The Scientific Press, Ltd., 28, 29, Southampton St., Strand, London, W.C., England. One shilling net.

This is a small volume for medical student and dispensers, rather than for nurses, as they do not write prescriptions.



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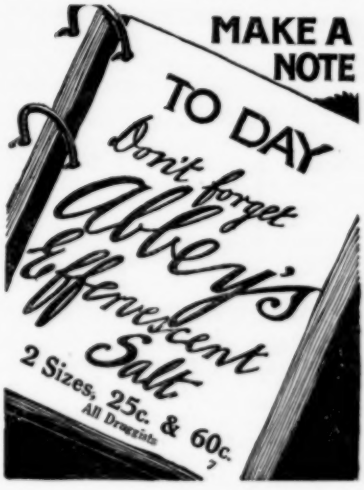

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